U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - //493	2. Fiscal Year Covered From:						
	1 / 1 / 2004 Through: 12 / 31 / 2004						
3. Name and address of person filing.	4. Name, file number, and address of labor organization.						
Name Larry Towns	Name OP&CMIA Local #219						
	Labor Organization File Number $050-629$						
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any						
Street 1655 Verbena	Street 1655 Verbena						
City Meridian	City Meridian						
State Idaho ZIP Code + 4 83642 6/27	State Idaho ZIP Code + 4 83642						
5. Position in labor organization. Business Manager							
Enter appropriate data below if, during the past fiscal year, you or your spot (except as specified in the exclusion). A. Held an interest in, engaged in transactions (including loans) with, or a monetary value from an employer whose employees your organization.	sions set forth in the instructions): terived income or other economic benefit of						
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.						
Name							
Trade Name, if any:							
P.C Box, Bldg., Room No., if any	7.b. Amount.						
Street							
City							
State ZIP Code + 4							
Signature							
15. Signature and verification. The undersigned declares, under penalty of F submitted in this report (including the information contained in any accompany) undersigned's knowledge and belief, true, correct, and complete. (See the sec	ng documents), has been examined by the signatory and is, to the best of the						
Signed (Common Signed (Commo	On 8-12-05 208 - 887 - 4769 Date Telephone Number						

Name of Person Filing Larry Towns	File Number U-
B. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is actionable (2) any part of which consists of buying from or selling or leasing directly or included in the consists of buying from or selling or leasing directly or included in the consists of buying from or selling or leasing directly or included in the consists of buying from or selling or leasing directly or included in the consists of buying from or selling or leasing directly or included in the consists of buying from or selling or leasing directly or included in the consists of buying from or selling or leasing to, or other of an employer whose employees your labor organization or with a trust in which your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or directly to, or otherwise
8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name OR/SW WA Cement Masons Apprenticeship Traini	
Trade Name, if any:	a. Labor Organization
P.O. Box, Bldg., Room No., if any	b. Trust c. Employer
Street 9848 E Burnside	, , , C. Employer
City Portland	
State Oregon	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name	Taft-Hartley Trust Fund received contributions under Collective Bargaining Agreement with affiliated Union and provides benefits
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	11.b. Approximate dollar value of such dealing. \$327,942
City	12.a. Nature of interest held or income received.
State ZIP Code + 4	Meeting Expenses related to Apprenticeship Trust Fund and Program
	(Some expenses are first paid by TPA and billed to Trust Fund - TPA is Masonry Industry Trust Administration, Inc.)
	The second secon
	12.b. Amount. \$198
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	or parts A and B above) or other thing of value.
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
City	
State ZIP Code + 4	**************************************
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<u></u>		
8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Cement Masons-Employers Pension Trust	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 9848 E Burnside	c. Employer	
City Portland		
State Oregon ZIP Code + 4 97216-2330		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Taft-Hartley Trust Fund received c under Collective Bargaining Agreem affiliated Union and provides bene	ent with
Trade Name, if any:	-	*
P.O. Box, Bldg., Room No., if any	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
Street		3
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$2,150,779
:	12.a. Nature of interest held or income received.	
	Trust Meeting Expenses	· •
	(Some expenses are first paid by T Trust Fund - TPA is Masonry Indust Administration, Inc.)	
		1
	12.b. Amount.	\$1,016

Name:

Larry Towns

Name of Trust Funds:

CMP

Cement Masons - Employers Pension Trust

CMH

Cement Masons - Employers Health, Welfare & Vacation Trust

CMA

OR & SW Washington Cement Masons Apprenticeship & Training Trust

Position with Trust Funds:

Business Agent

Date	_ <u></u>	otal	<u></u> C	MP	СМН	CMA		Explanation
Trust Meeting	gЕ	xpenses	:					
9/8/2004	\$	426.00	\$	383.40		\$	42.60	Trustee Meeting - Travel
9/8/2004	\$	35.90	\$	32.31		\$	3.59	Trustee Meeting - Meals
9/9/2004	\$	220.43	\$	198.39		\$	22.04	Trustee Meeting - Lodging
9/9/2004	\$	97.11	\$	87.40		\$	9.71	Trustee Meeting - Meals
9/10/2004	\$	220.43	\$	198.39		\$	22.04	Trustee Meeting - Lodging
9/10/2004	\$	0.50	\$	0.45		\$	0.05	Phone Charges
9/10/2004	\$	229.72	\$	206.75		\$	22.97	Trustee Meeting - Meals
9/11/2004	\$	220.43	\$	198.39		\$	22.04	Trustee Meeting - Room & Tax
9/11/2004	\$	140.06	\$	126.05		\$	14.01	Trustee Meeting - Meals
9/12/2004	\$	24.35	\$	21.92		\$	2.44	Trustee Meeting - Meals
Total 2004	\$1	,128.68	\$ 1	1,015.81		\$	112.87	•
Apprenticesh	ip I	Program	Ex	enses:				
11/19/2004	\$	38.32				\$	38.32	Meals - Idaho Apprentices Graduation
11/20/2004	\$	46.70				\$	46.70	Meals - Idaho Apprentices Graduation
Total 2004	\$	85.02				\$	85.02	•

SUMMARY

Cement Masons - Employers Health, Welfare & Vacation Trust

\$ - Trust Meeting Expenses

Cement Masons - Employers Pension Trust

\$1,015.81 Trust Meeting Expenses

OR & SW Washington Cement Masons Apprenticeship & Training Trust

\$ 112.87 Trust Meeting Expenses\$ 85.02 Program Expenses

\$ 197.89